

Use type a plus sign (+) inside this box.

Approved for use through 09/30/2000. OMB 0651-0476
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE66/11/01
J6682 U.S. PTOU.S. PRO
10/11/17

UTILITY PATENT APPLICATION TRANSMITTAL

* for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. PC10139A MAG

First Named Inventor or Application Identifier Nancy J. Harper

Title Sertraline Oral Concentrates

Express Mail Label No. EJ248206049US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. *Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)
2. Specification [Total Pages 19]
(preferred arrangement set forth below)
 - Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R&D
 - Reference in Microfiche Appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
3. Drawing(s) (35 U.S.C. 11.3) [Total sheets]
4. Oath or Declaration [Total pages 2]
 - a. Newly executed (original)
 - b. Copy from a prior application (37 CFR § 1.63(d))
(for continuation/divisional with Box 17 completed)
[Note Box 5 below]
 - i. DELETION OF INVENTOR(S)
Signed statement attached deleting
inventor(s) named in the prior application,
see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).
5. Incorporation By Reference (useable if Box 4b is checked)
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

ADDRESS TO: Assistant Commissioner for Patent
Box Patent Application
Washington, DC 20231

6. Microfiche Computer Program (Appendix)
7. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. Computer Readable Copy
 - b. Paper Copy (identical to computer copy)
 - c. Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

8. Assignment Papers (cover sheet & document(s))
9. 37 C.F.R. § 3.73(b) Statement Power of Attorney
(when there is an assignee)
10. English Translation Document (if applicable)
11. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
12. Preliminary Amendment
13. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
14. *Small Entity Statement filed in prior application,
Statement(s) Status still proper and desired
(PTO/SB/09-12)
15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
14. Other:

*NOTE FOR ITEMS 1 & 14: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

 Continuation Divisional Continuation-in-part (CIP) of prior application No: _____ / _____

Prior application information: Examiner

Group/Art Unit: _____

18. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here)					<input checked="" type="checkbox"/> Correspondence address below
Name	Gregg C. Benson					
Address	PFIZER INC					
	Eastern Point Road					
City	Groton	State	CT	Zip Code	06340	
Country	USA	Telephone	860-441-4904		Fax	860-441-5221

NAME (Print/type)	Martha A. Gammill	Registration No. (Attorney/Agent)	31,820
Signature	Martha A. Gammill		
	Date	10/11/99	

FEE TRANSMITTAL

Patent fees are subject to annual revision on October 1.
These are the fees effective October 1, 1997.

Small Entity payments **must** be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.
See 37 C.F.R. §§ 1.27 and 1.28.

Total Amount of Payment (\$956.00)

Complete if Known	
Application Number	To be assigned.
Filing Date	Herewith
First Named Inventor	Nancy J. Harper
Examiner Name	To be assigned.
Group/Art Unit	To be assigned.
Attorney Docket No.	PC10139A MAG

METHOD OF PAYMENT (check one)

The commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 16-1445

Deposit Account Name Pfizer Inc

Charge Any Additional 37 Fee Required Under C.F.R. §§ 1.1.6 and 1.17. Charge the Issue Fee Set in 37 C.F.R. § 1.1.8 at the Mailing of the Notice of Allowance.

2. Payment Enclosed:

Check Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	380	216	190	Extension for reply within second month	
117	870	217	435	Extension for reply within third month	
118	1,360	218	680	Extension for reply within fourth month	
128	1,850	228	925	Extension for reply within fifth month	
119	300	219	150	Notice of Appeal	
120	300	220	150	Filing a brief in support of an appeal	
121	260	221	130	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,210	241	605	Petition to revive - unintentional	
142	1,210	242	605	Utility issue fee (or reissue)	
143	430	243	215	Design issue fee	
144	580	244	290	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Statement	
581	40	581	40	Recording each patent assignment per property (times number of properties)	40.00
146	760	246	380	Filing a submission after final rejection (37 CFR 1.129(a))	
149	760	249	380	For each additional invention to be examined (37 CFR 1.129(b))	
SUBTOTAL (1) (\$)					
760.00					
2. EXTRA CLAIM FEES					
Extra Claims Fee from below Fee Paid					
Total Claims 19 -20**= 0 x 18 = 0					
Independent Claims 5 - 3**= 2 x 78 = 156.00					
Multiple Dependent 260 = 0					
SUBTOTAL (2) (\$)					
156.00 *Reduced by Basic Filing Fee Paid					
SUBTOTAL (3) (\$)					
40.00					

SUBMITTED BY

Complete (if Applicable)

Type or Printed Name

Martha A. Gammill

Reg. Number 31,820

Signature

Martha A. Gammill

Date

10/11/99

Deposit Account User ID

16-1445